

## RECEIVED

FFB 23 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

TITE OF		STATE OF NEW HAMPSHIKE		
	2017 Statement of Income and Ex			
		for LOBBYISTS		
		(RSA Chapter 15)		
111111	PLEASE PRINT			

I. Name of Lobbyist(s) _	C	amille Cooper	DEPARTMENT O		
II. Name of lobbyist's pa	rtnership, firm o	r corporation, if a	ny:		
National Associa	ation to Protect C	hildren	•		
(Name o	f partnership, firm o	corporation)	F-10-1		
P.O. Box 2187		Knoxville		37901	
Business Address: (Street)		(Town/City)		(Zip Code)	
(865) 525-0901	· · · · · · · · · · · · · · · · · · ·	) N/A	<sub>e-mail</sub> jer	nniferallen@protect.org	
(Telephone)		(Fax	)		
III. This statement cover reportable expense trans				ou may file a separate report for	
All reportable transact	ions occurring in t	he months prior to	the reporting data relative	a to the following client:	
			the reporting date relative	e to the following chem.	
	sociation to Prote		obbyist Registration Form)		
<u>OR</u>	un realie of Cheffe a	s it appears on the Le	obyist Registration Form)		
☐ All reportable transacti		t (including the lob	byist's family), or the lob	bying firm listed below which ar	
unrelated to any particular	client.				
IV. Date of Report A	April 26, 2017 🔲		July 26, 2017		
	rom date of registra	tion to 3/31/17	activity from 4/1/17 to 6		
	October 25, 2017 🗌			January 31, 2018 🔀	
acti	vity from 7/1/17 to 9	/30/17	activity from 10/1/17 to	12/31/17	
V. There have been no If this box is checked, com Concord, NH 03301.				nce the last report.   Gice, State House, Room 204,	
VI. Check if additional r	eports are attach	ed:			
	-		ile Addendum A– Fees	and Expenses	
☐ If you have paid an ho Expense Reimbursement	onorarium or reiml	oursed expenses, yo	ou must file Addendum I	B- Report of Honorariums or	
☐ If you, your firm, or y	our family has ma	de political contrib	utions, you must file Add	dendum C-Political Contribution	
C					
Sworn Statement/Affirm I have read RSA 15, RSA and complete to the best of	15/B/RSA 14-¢:	ind RSA 664 and h	ereby swear or affirm tha	at the foregoing information is true	
(0)	el		1-3-18		
(Signature of lobbyist)				(Date)	
Camille Cooper					
(Print Name of lobbyist)					